



State of New Hampshire 2015 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2015

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/11/2015

Business ID: 600925

William M. Gardner

Secretary of State

APCO LANDSCAPE SUPPLY L.L.C.

PO BOX 615

GREENLAND, NH 03840

ADDRESS OF PRINCIPAL OFFICE:

313 PORTSMOUTH AVE

STRATHAM, NH 03885

REGISTERED AGENT AND OFFICE:

TATARINOWICZ, ERIC

564 LAFAYETTE RD

HAMPTON, NH 03842

ENTITY TYPE: LLC

BUSINESS ID: 600925

STATE OF DOMICILE: NEW HAMPSHIRE

SELLING LANDSCAPE SUPPLIES, LANDSCAPING AND HAULING OF
MATERIALS

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☒

The new principal office address 31 Folly mill Rd, Seabrook, NH 03874

PO Box is acceptable.

MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

MANA. Eric Tatarinowicz

STREET 313 Portsmouth Ave

CITY/STATE/ZIP Stratham Nh 03885

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

eric Tatarinowicz

Please print name and title of signer:

eric Tatarinowicz

/

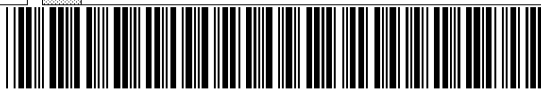
MANAGER

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



060092520151001

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301